

**Request for Proposals
RFP # 201101-01**

Solicitation to Assist the North Carolina Health Information Exchange
Develop a RFP for Statewide HIE Services

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Request for Proposals
Consultant to Assist NC HIE Develop Statewide HIE Services RFP

1. INTRODUCTION

1.1. Overview

You are invited to review and respond to this Request for Proposal (RFP). To submit a proposal to provide the requested services, you must comply with the instructions contained in this document as well as the requirements stated in the Scope of Work (SOW), Contractor Response Guidelines, and Attachment A: Cost Worksheet.

This is a deliverables-based fixed price contract for procurement consulting services only. By submitting a proposal, your firm agrees to the terms and conditions stated in this RFP.

Read this document carefully. The electronic proposal due date is **February 4, 2011** by 5:00 PM EST. Responses to this RFP must be submitted to the North Carolina Health Information Exchange (NC HIE) contact noted in Section 1.3 below.

1.2. Key Dates

Contractors are advised of the key dates and times shown below and are expected to adhere to them. All times noted in this document are Eastern Standard Time (EST).

Event	Date, Time
RFP posted	January 21, 2011, 5:00 PM EST
Responses due	February 4, 2011, 5:00 PM EST
Interviews (<i>Optional</i>)	February 10-11, 2011
Contract award	February 25, 2011
Project Kick-Off Meeting	February 28, 2011

1.3. Contact

Please direct all inquiries in writing to NC HIE to Anita Massey, Project Manager at anita.massey@nc.gov. Include "RFP # 201101-01" in the subject heading.

Applicants must submit an electronic version and five bound copies of their proposals to Anita Massey prior to February 1, 2011 at 5:00 PM EST.

Electronic versions must be e-mailed to Anita Massey at anita.massey@nc.gov.

The bound copies must be mailed to the following address:

**North Carolina Health Information Exchange
Post Office Box 17462
Raleigh, NC 27619**

2. SCOPE OF WORK

2.1. Statement of Purpose

The purpose of this Request for Proposal (RFP) is to obtain the services of a Procurement Consultant, either an individual or a firm (hereafter “Contractor”), to assist the North Carolina Health Information Exchange (NC HIE) with the acquisition of a Technical Services Vendor (hereafter “Vendor”) who will be responsible for implementing the Health Information Exchange (HIE) core services described in North Carolina’s HIE Strategic and Operational Plans.

The Contractor resulting from this RFP will develop a procurement strategy for acquiring the core services vendor, including the development of a Request for Proposal (RFP) for the core services that includes technical requirements at a level of specificity sufficient for bidders to develop a detailed work plan in response to the core services RFP. In addition, the Contractor will provide procurement support through the evaluation, oral presentation, and contract negotiation and contract execution phases.

The primary goal of the core services RFP that will be developed by the Contractor resulting from this solicitation will be to provide a fair basis for qualified vendors to respond, and a framework for NC HIE to select, the most functionally qualified and cost-effective proposal. The core services RFP is scheduled for release on March 22, 2011. Section 2.4 of this RFP specifies the tasks and deliverables for which the Contractor will be responsible.

2.2. Background

NC HIE, Inc., is a non-profit public benefit corporation designated by the State of North Carolina to lead a collaborative process for developing and supporting HIE policies and services in North Carolina. Through a cooperative agreement with the federal Office of the National Coordinator for Health Information Technology (ONC), NC HIE will develop and operate a statewide HIE infrastructure that enable the electronic exchange of health information across the state.

NC HIE’s primary objective is to ensure that eligible hospitals and providers have transparent and seamless access to information exchange services that allow them to take full advantage of the Electronic Health Record (EHR) Incentive Program. These incentives are based on the successful adoption and “meaningful use” of EHRs as defined in the final rules posted by the Centers for Medicare & Medicaid Services (CMS) on July 28, 2010.

North Carolina’s HIE Operational Plan (hereafter “the Plan”) was completed and submitted to ONC in August 2010. The architecture described in the Plan is intended as a minimal set of technical criteria to enable statewide exchange of electronic health information across organizational boundaries that will establish a secure and reliable basis for HIE that is compliant with State and federal policies.

NC HIE does not intend to build duplicate or competing HIE services in North Carolina. Instead it will focus on providing core services, such as registries of authenticated exchange partners, which will enable it to become the trusted intermediary between entities exchanging health information regionally and across the state.

North Carolina’s framework for hosted shared statewide HIE services consists of two categories of services: core and value-added.

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Core services represent the suite of registries, record locator service and security functions that will create a cost-effective pathway for Qualified Organizations to locate and route health data. NC HIE's core services will facilitate providers' ability to exchange information, including structured lab results and summary care records, two of the three Meaningful Use HIE transactions identified by ONC as high priorities for 2011.

Once available, Qualified Organizations will also utilize NC HIE's core services to access an evolving range of value-added services offered by state agencies, Health Information Organizations (HIOs), vendors, or other organizations. The availability of value-added services will be based on state and federal priorities, guidelines, and/or mandates and deployed incrementally in phases based on the expected value derived from their use.

By consolidating access to value-added services through the core services, North Carolina will be able to share and minimize operational costs, increase user acceptance and participation, and maximize benefits to all stakeholders. The NC HIE will continue to assess the most effective mechanisms and timing for provision of value-added services through core services, taking into account costs, contractual obligations, and sustainability considerations.

A visual representation of the components and relationships between stakeholders and Core and value-added services is provided below.

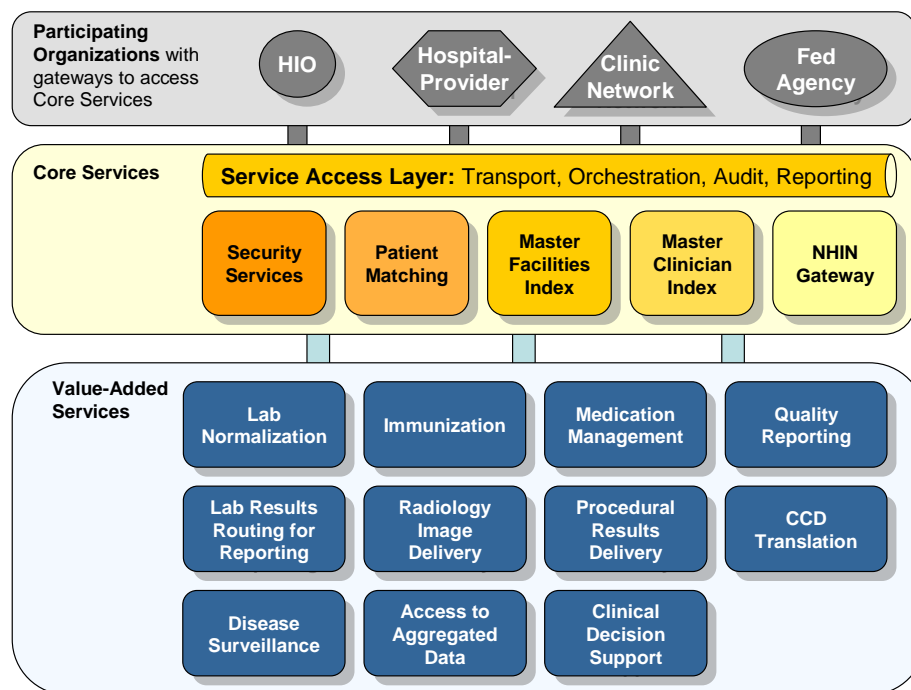


Figure 1. Illustration of statewide core and value-added HIE services

The NC HIE will provide a set of core services that support connectivity and data transport exchange between multiple entities and systems in the state.

The goal of core services is to provide a flexible infrastructure needed for authorized organizations to access value-added services in a secure, timely, and cost-effective manner.

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Core services create a foundation for organizations and participants to exchange health information across their organizational boundaries, such that two entities that have not necessarily exchanged information previously can:

- Identify and locate each other in a manner they both trust;
- Reconcile the identity of the individual patient to whom the information pertains;
- Exchange information in a secure manner that supports both authorization decisions and the appropriate logging of transactions; and
- Measure and monitor the system for reliability, performance and service levels.

The core services will assure authentication of the clinician before enabling a request for information and authorization of the clinician to view the requested information. The core services will support both push and pull transactions. Push transactions will make use of the Master Clinician Index to enable sending information to a provider, once the sender has received authorization. For a pull transaction, the core services will identify the patient and locations of information across multiple venues and report the authorized patient information that is available back to the clinician. After reviewing the information, the clinician will be able to request that all or some of the information be retrieved and can then use the information for point-of-care discussion and decision making with the patient.

The monitoring and measurement of these services is a core non-functional requirement for statewide services to take hold. Shared service consumers require reliability, especially if the HIE infrastructure is deployed into core clinical and care coordination processes.

The core services consist of the following:

Service Access Layer: The Service Access Layer consists of uniform transport and security infrastructure based on web services standards and a Service Oriented Architecture, and is responsible for mediating all access to and from other core services, specifically the various registries, security services and the NHIN gateway. The Service Access Layer is based on the NHIN messaging platform standard as approved by HHS where applicable. There may be specific integration nodes that will utilize other established and standards-based mechanisms that are necessary to include in order to deliver on the functionality described as part of health information exchange services. This uniform interface simplifies interoperability. The Service Access Layer handles all transactions (push/pull) to and through the core services. It acts as the method to transport information to/from value-added services. It works with the security services to establish authentication and maintains statistics on users, transactions, and information traffic.

Security Services: Security services consist of multiple functional layers that ensure only authorized users are able to access system or service resources. It also contains the functions that allow for system administrators to review and ensure that only those with the appropriate credentials and permissions have accessed the system. This is frequently described as the “4As” security framework: Authorization, Authentication, Access Control and Auditing. Identity management is used to generate a list of users and their associated roles. Access control represents the intersection between authentication and authorization between users and the system. In a Service Oriented Architecture, it is also necessary to detect and authenticate the systems that are connecting. This is frequently handled through digital certificates that prove to the HIE that the systems interacting are trusted sources. Because there are multiple services and components, auditing in HIEs is especially challenging. A consistent audit trail needs to be established across components in order to detect event anomalies from authorized users. The Security Services core will include an index of participating entities (or Qualified Organizations)

which will include organizational details. It will store participating entity rules (based on data sharing agreements) to enable the sharing of clinical records. Information involved in the security transactions includes but will not be limited to roles, patient consent, participating entity provisioning, entity de-provisioning, auditing transactions, reporting transactions, compliance with policies and procedures, authentication of participating entities and certificate authority.

Person/Patient Matching Service: The Person/Patient Matching Service provides three capabilities. The first capability is a reconciliation service that matches (i.e., cleans up) records from existing systems to provide a definitive mechanism for locating all records for a patient. This is usually accomplished via a probabilistic algorithm with optional manual resolution when the algorithm fails. Records may stay in the existing system, or some or all of those records may be moved or copied into this service's storage. During implementation, various design patterns will be considered including: keeping records in their current location with the possible exception of limited demographic data, centralizing or developing master indexes, or distributing and synchronizing indexes. Specific design choices will be based on participant capabilities and enabling HIE functions. As the person/patient identities are being indexed specifically for HIE, a second capability enables requesting a list of patient information documents or clinical data locations using this index, either via a demographic attribute query (i.e., find all patient info for the patient with <name, date of birth, ...>) or via a direct index lookup if the querying system has the patient index available. The third capability enables requesting one or more of the documents listed from a query be transferred to the requester's system. The second and third functions described utilize the person/patient matching service and may be exposed as part of the clinical document exchange service described in the value-added services discussion below.

Master Facilities Index Service: This component is an index of facilities with which the clinician (or other user) registered in North Carolina has an affiliation/relationship. It processes additions, deletions, and updates to the facility index and processes requests for information from facilities index.

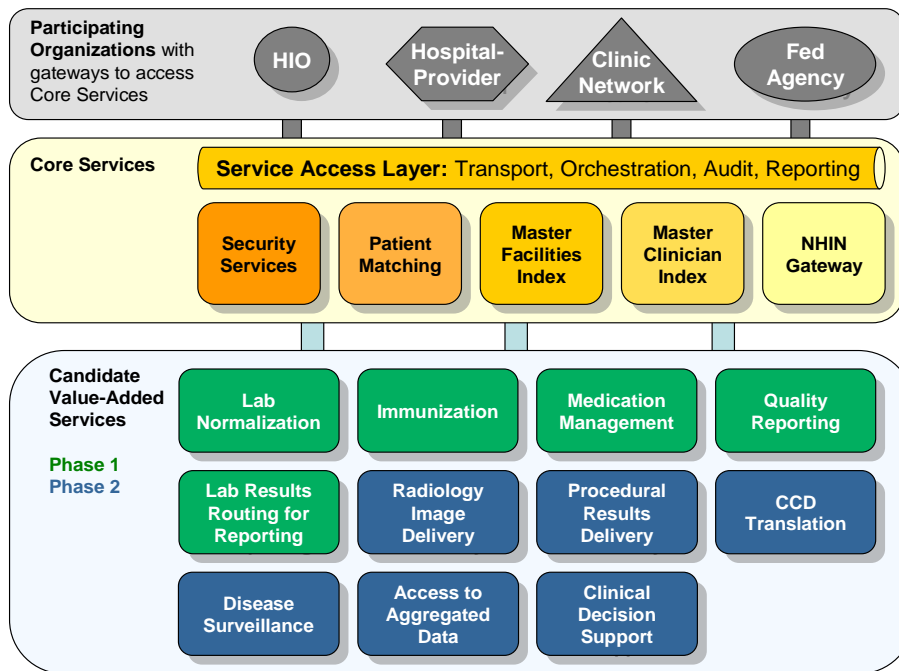
Master Clinician Index Service: This component is an index containing all relevant information on all registered clinicians within North Carolina. It processes additions, deletions, and updates to relevant clinician information, and will process requests for relevant clinician information. "Clinician" is broadly defined to include all certified and licensed clinicians (e.g., physicians, nurse practitioners, nurses, certified nursing assistants, medical assistants). The Master Clinician Index Service will be an open and authoritative state level provider directory accessible to all Qualified Organizations in the state.

NHIN Gateway: The NHIN Gateway provides for a single statewide implementation of the NHIN Connect gateway available as a web service for authorized users and entities. This service is the required standard for interoperability with federal agencies, and the proposed standard for the exchange of clinical information across the NHIN.

NC HIE intends to offer these core services and selected, agreed upon value-added services beginning in November 2011, in an environment where applicable laws and possibly NC HIE policies may not be firmly settled. In addition, value-added services will be developed based on ongoing analysis and prioritization recommendations from NC HIE. NC HIE will also assess the optimal location (i.e., at the organizational, regional, statewide, or cross-state level) and entities for hosting the value-added services.

An illustration of the staging of candidate value-added services is provided below.

Landscape Assessment and Gap Fill Strategy **Core Services and Value-Added Services**



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Figure 2. Proposed core services and phased implementation of value-added services

2.3. Reference Documents

Considerable information about NC HIE may be found at <http://www.ncdhhs.gov/healthit/exchange/index.htm>.

The following documents provide useful background to crafting a thoughtful response to this RFP.

North Carolina's HIE Strategic and Operational Plans developed by North Carolina stakeholders through a collaborative process. These plans provide a comprehensive approach to addressing the state's HIE needs, while acknowledging North Carolina's breadth, diversity, and the complexity of implementing state-level HIE initiatives. These documents provide important definitions and contextual information needed to evaluate the functional requirements outlined in the approved Plans. See <http://www.ncdhhs.gov/healthit/exchange/index.htm>

2.4. Project Tasks and Deliverables

The following are general tasks for the purpose of Contractor Proposal development. The Contractor is expected to discuss additional tasks required to deliver a successful procurement. Note that each high level task results in one or more associated deliverables. NC HIE will pay the Contractor upon acceptance of the specified deliverables.

NC HIE will provide the Contractor with a Project Manager who will serve as the Contractor's primary point of contact on contract related issues. The Contractor will work closely with NC HIE's Chief Information Officer and other staff or contractors responsible for the successful implementation of the core services.

Task 1 – Manage the Project

Deliverable 1 – Project management plan; weekly and monthly status updates

1. **Use formal project management practices.** The Contractor is required to use formal, structured project management practices in managing the HIE core services procurement:
 - a. Develop and maintain a detailed procurement work plan. The work plan must be in MS Project or an alternative format approved by NC HIE, and the work breakdown structure (WBS) detail must be approved by NC HIE.
 - b. Confer weekly with the NC HIE Project Manager.
 - c. Participate in weekly project Steering Committee meetings.
 - d. Provide the Project Manager with weekly status reports.
 - e. Provide the Project Manager with information concerning procurement risks and issues, for inclusion in the project's risks and issues logs.
 - f. Prepare ad hoc reports, as requested, and in a format approved by NC HIE.
 - g. Ensure the quality of acquisition deliverables through quality control reviews. The quality control approach, including checklists, must be approved by NC HIE.
 - h. Maintain an acquisition document library, including relevant emails, memos, and other documents that provide a comprehensive audit history of the core services procurement.
2. **Report weekly.** The Contractor is required to prepare project status reports on a weekly basis. The report content must include, but not be limited to, the following sections. The final format and content areas need to be approved by NC HIE:
 - a. Work completed within the reporting period – describes tasks accomplished within the reporting period and the status of associated deliverables.
 - b. Work in progress – describes activities currently underway.
 - c. Scheduled Status – compares completed tasks and deliverables against those scheduled to date, and includes explanations of schedule variances and recommendations for mitigating the variances.
 - d. Work to be completed – describes activities and deliverables, contained in the acquisition procurement work plan, which are expected to be completed within the next reporting period.
 - e. Issues, risks, problems and resolutions – highlights key issues and concerns which may need to be prioritized and addressed by the Contractor and the NC HIE Project Manager. Resolutions to previous problems will be reported, as well as mitigation recommendations to new problems and risks.

3. **Project and other related meetings.** The Contractor is required to participate in face-to-face or teleconference meetings, as needed to fulfill this Scope of Work, with the NC HIE project team, the NC HIE Clinical and Technical Operations Workgroup, and other ad hoc groups formed to facilitate the successful implementation of the core services.

Task 2 – Develop the RFP

Deliverable 2 – Core services RFP published on the NC HIE web site

Develop the core services RFP in accordance with NC HIE’s Procurement Policy.

Note that prior to the award of the contract for Procurement Consulting Services, NC HIE anticipates that the technical requirements to be included in the final RFP will be elaborated at some level of detail that will be required for the RFP. While it is anticipated that the Contractor will consume all or part of this work product, it is expected that the Contractor will use its own resources to develop and complete all RFP sections, including technical sections.

The Contractor must possess the technical knowledge and resources necessary to understand, articulate, and express in written form the requirements of the RFP at a level appropriate for a procurement effort. These services can be broadly understood by reading the documents listed in Section 2.3 together with additional third party contemporary information published on such topics as “Provider Directory,” “Registries,” “Certificate Authority,” and “Trusted Framework.”

The Contractor, through NC HIE, will have access to and the use of stakeholder groups, including NC HIE Workgroups, to supplement its resources in producing content for the RFP. Reliance by the Contractor on NC HIE resources should not be mistaken for the Contractor’s self-reliance, as the Contractor is responsible for producing the RFP’s content.

At a minimum, the following must be provided:

1. Establish baseline RFP:
 - a. Request and review relevant data.
 - b. Interview subject matter experts in person, over the phone, or via email.
 - c. Advise NC HIE of best practices for a successful procurement and to mitigate issues throughout the procurement process.
 - d. Recommend methods to expedite the procurement process.
2. Participate in monthly meetings of the NC HIE Clinical and Technical Operations Workgroup (approximately two hours per meeting, via conference call).
3. Facilitate requirements meetings as needed for the development of the RFP:
 - a. Schedule and conduct at least one and up to three requirements development sessions. At least one of these sessions must be in person.
 - b. Gather and document subject matter experts’ input into the RFP requirements.
4. Prepare draft RFP:
 - a. Structure the RFP to ensure the selected Vendor will be able to deliver quality services in a timely fashion and within budget.
 - b. Structure the RFP to allow NC HIE to monitor the Vendor’s progress during the contract to detect problems and/or delays before they become critical.
 - c. The RFP must include detailed information as follows:
 - i. A clear and concise description of the work to be performed, services to be provided, problem to be solved, and the goals and objectives to be met
 - ii. An explanation, in realistic terms, of what the Vendor is expected to accomplish, including the desired approach to the problem and the

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- specific functions, tasks, and activities that must be performed
 - iii. Business (functional) requirements
 - iv. Technical requirements and specifications
 - v. Legal limitations
 - vi. Established performance timelines, completion dates, and methods of measurement
 - vii. A description of the items, products and results to be delivered and method of validation
 - viii. The extent and nature of the assistance and cooperation from NC HIE that will be available to the development Vendor
 - ix. Instructions that describe the format that the core services proposal must follow and the elements it should contain, including proposal evaluation and Vendor selection criteria
 - d. The RFP shall include the following sections or an equivalent or recommended alternative that achieves the same goal:
 - i. Introduction and Review of Requirements
 - ii. Rules Governing Competition
 - iii. Proposed Solution
 - iv. Administrative Requirements
 - v. Statement of Work Requirements
 - vi. Cost Proposal
 - vii. Proposal Format
 - viii. Proposal Evaluation
 - ix. Interview and/or Demonstration
 - x. Appendix A – Contract and Contract Terms
 - e. Provide RFP drafts throughout the RFP development process for review by NC HIE as follows:
 - i. Upon request of NC HIE's Project Manager
 - ii. Upon completion of each draft RFP section
5. Revise draft RFP upon request:
- a. Update draft sections based on NC HIE staff or stakeholder review comments. Assume that the maximum number of reviewers is six.
 - b. Provide revisions no later than as required by NC HIE.
6. Finalize RFP: Upon approval by NC HIE reviewers of the draft RFP, the Contractor must provide the following:
- a. Final formatted version of the RFP to post on the NC HIE web site.
 - b. Backup and project documentation as required to provide a full record of requirements documentation from initial through final iterations.

Task 3 – Evaluation Team and Procedures

Deliverable 3 – Core services proposal evaluation, selection team charter, and procedures approved by NC HIE

At a minimum, the Contractor must:

1. Assist NC HIE with identifying evaluation team members. Evaluation team members must not have a conflict of interest.
2. Work with NC HIE and its legal team to collect the appropriate disclosure statements from potential evaluation team members and any necessary affidavits from approved evaluation team members.
3. Utilize evaluation best practices:
 - a. Work with NC HIE throughout the development of the procedures document.
 - b. Develop procedures for receipt of proposals and proposal review.
 - c. Define and document the process the evaluation team will use to score the proposals utilizing criteria defined in the RFP.
 - d. Develop evaluation and selection procedures including evaluation team roles and responsibilities.
 - e. Assist in helping evaluation team members reach consensus.
4. Provide a draft evaluation procedures document to the Project Manager for review.
5. Make changes to the evaluation procedures document upon request of NC HIE.
6. Deliver a final evaluation procedures document concurrently with the final RFP.
7. Train evaluation and selection team members on the evaluation framework and the process. For budgeting purposes, assume a maximum of nine evaluation team members, Contractor will be expected to provide a rationale for recommended number of evaluation team members.

Task 4 – Support the Procurement Effort

Deliverable 4 – Procurement support documents

1. Response to bidder questions
2. Addenda
3. Pre-bid conference agenda
4. Oral presentation agenda
5. Proposal evaluation results
6. Oral presentation evaluation results
7. Evaluation and Selection Report approved by NC HIE

Upon release of the RFP by NC HIE, support NC HIE throughout the procurement process leading up to and including contract award. At a minimum the following must be provided:

1. Upon request of NC HIE, prepare response(s) to bidder questions in the following manner:
 - a. Identify and meet with subject matter experts to develop response(s).
 - b. Document response(s) in a format acceptable to NC HIE.

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- c. Provide draft response document(s) to NC HIE for review.
 - d. Revise a draft response document as requested by NC HIE. Contractor will continue making revisions as requested by NC HIE until the response document is acceptable, including up to three revisions.
 - e. Provide the final response to NC HIE no later than as required by NC HIE.
2. Assist and prepare RFP addenda upon request of NC HIE as follows:
 - a. Prepare addenda in an acceptable format.
 - b. Identify and meet with subject matter experts to develop addenda.
 - c. Provide draft addenda to NC HIE for review.
 - d. Revise addenda as requested by NC HIE.
 - e. Provide final addenda to NC HIE no later than as required.
3. Evaluate initial proposals:¹
 - a. Participate in initial proposal evaluations and confidential discussions as requested.
 - b. Provide technical support to the team that will review and evaluate the proposals as part of the selection process.
 - c. Document evaluation team scores and comments in the evaluation procedures document in preparation of the Initial Proposal Evaluation and Selection Report.
4. Facilitate oral presentations by up to three finalists:
 - a. Coordinate with NC HIE to select the dates and locations and arrange meeting details.
 - b. Make recommendations to NC HIE regarding the appropriate individuals from NC HIE and/or key stakeholders who will represent the organization during the presentations.
 - c. Draft an agenda.
 - d. Facilitate the presentations.
 - e. Document evaluation team oral presentation scores and comments in the Oral Presentation Evaluation and Selection Report.
5. Facilitate development of Best and Final Offers (BAFO):
 - a. Coordinate with NC HIE to select the dates and locations for BAFO discussions and arrange meeting details.
 - b. Make recommendations regarding the appropriate individuals from NC HIE and/or key stakeholders to speak for the organization.
 - c. Draft an agenda.
 - d. Facilitate the discussions.
6. Prepare Final Evaluation and Selection Report:
 - a. Work with NC HIE throughout the development of the document.
 - b. Provide a draft report to NC HIE's Project Manager for review.
 - c. Make changes to the report upon request.
7. Update procurement documents upon request of NC HIE.
8. Throughout the procurement process, make available to the procurement team, in a timely manner, staff with procurement knowledge and experience, to help the

¹ Note: the Contractor will not be a "scoring member" of the evaluation team.

procurement team make decisions related to the procurement process.

Task 5 – Respond to Bid Protests

Deliverable 5 – Bid protest defense documentation

In the event of a bid protest, the Contractor will be involved in preparing documents for and participating in any meetings for development of a defense. Contractor may be required to attend and testify at any protest hearings to help resolve the protest.

Task 6 – Conclude Contract

Deliverable 6 – Contract documents

1. Work with NC HIE to develop the contract template
2. Prepare the final contract for review
3. Assist NC HIE with the negotiation and final execution of the contract

Prepare a contract template, manage contract negotiations, and finalize execution of a contract to implement the core services. This work will be done in conjunction with NC HIE's legal services team.

2.5. Contract Completion Criteria

This contract will be considered complete when the NC HIE Project Manager has approved and accepted all assigned deliverables.

2.6. Deliverable Acceptance Criteria

All concluded work must be submitted to NC HIE for review and approval or rejection. Payment for all tasks performed under this Statement of Work will be by deliverable. It will be NC HIE's sole determination as to whether a deliverable has been successfully completed and is acceptable.

Throughout the contract, NC HIE will review and validate deliverables prior to final acceptance. In addition, NC HIE's Project Manager will verify and approve the Contractor's deliverable invoices. Signed acceptance is required from the NC HIE Project Officer to approve an invoice for payment.

Deliverable acceptance criteria consist of the following:

1. Deliverable-specific work was completed as specified and the final deliverable product/service was rendered.
2. Plans, schedules, designs, documentation, and reports (deliverables) were completed as specified and approved.
3. All deliverable documentation and artifact gathering have been completed.
4. All deliverables are in a format useful to NC HIE.
5. If a deliverable is not accepted, NC HIE will provide the reason, in writing, within ten business days of receipt of the deliverable.

2.7. Procurement Support Consultant Minimum Requirements

2.7.1. Contractor Qualifications

Contractors must demonstrate at least three years of experience performing the services described in this RFP, including detailed evidence that their organization has previous experience with similar services on projects of a similar scope and range as the project specified in this RFP. In addition, to be considered for additional procurement activities, Contractors must demonstrate the capacity to work on multiple projects simultaneously through disclosure of personnel and other resources that would be responsible for additional procurement related work, if the opportunity arose.

The following are desirable Contractor qualifications:

1. Knowledge and experience with statewide or regional HIE procurements .
2. Experience contracting with governments and/or non-profit entities that have done business with the federal and state government.
3. Knowledge and deep understanding of the ONC State HIE program and Health Information Technology (HIT) deployment.
4. Strong familiarity with HITECH, the ONC, North Carolina's Department of Health and Human Services, CMS' EHR Incentive Program and the Meaningful Use Criteria, Nationwide Health Information Network (NW HIN) requirements, and other national standards.
5. Technical and functional knowledge of health IT data, transport, provider, registry, and trusted framework standards and methods.
6. Experience drafting RFPs for HIE core infrastructure solutions and evaluating subsequent responses (quantitatively and qualitatively).
7. Experience with HIE solution implementation from both a project management and technical architecture standpoint.
8. Experience convening stakeholders at a national, regional or state level for HIE policy discussions and consensus-building.
9. Familiarity and experience with North Carolina and its diverse policy and health care landscape.

2.7.2. Engagement Team Qualifications

Contractor must demonstrate that staff assigned to the project possess the experience, education, knowledge, and skills required to perform the SOW described in this RFP.

At least one member of the proposed Engagement Team must possess the following experience:

1. Minimum three years of experience providing Procurement Consulting Services, including at least one engagement that involved procurement for an enterprise-wide effort with multiple stakeholders.
2. Minimum three years of experience in defining requirements for technical procurements.

At least one member of the proposed Engagement Team must possess knowledge and understanding of the following:

- CCD (Continuity of Care Document) and CCR (Continuity of Care Record)
- C32 -The Summary Documents Using Health Level Seven International (HL7) Continuity of Care Document (CCD)
- NHIN Direct
- NHIN Exchange
- HTTP
- SOAP-based Web Services
- REST-based Web Services
- HL7 2.x and HL7 3.x
- PIX PDQ
- IHE Federal Architecture
- Environments scalable to accommodate an incremental implementation approach
- Messaging conventions, standards, and protocols used in support of trusted framework and certificate authority
- Minimum of three years of experience in and knowledge of Service Oriented Architecture concepts

Desirable team member qualifications include:

1. Project Management certification, such as Project Management Professional certification from the Project Management Institute or a degree in Project Management or a related discipline from an accredited university
2. Additional experience providing procurement consulting services to North Carolina State agencies and North Carolina based non-profit or quasi-governmental agencies
3. Experience in developing deliverables-based contracts
4. Experience in and knowledge of the health care sector, to include:
 - Private and public health care systems
 - Ambulatory services
 - Rural telehealth
 - Public health
 - Mental health
 - Laboratory and Rx services
 - Physicians and the respective associations
 - Provider relations
 - Hospitals
 - Payors /managed care
 - Federal and state health agencies, including:
 - Department of Veterans' Affairs / Veterans Health Information Systems and Technology Architecture (VistA)
 - Department of Defense / AHLTA (Armed Forces Health Longitudinal Technology Application)
 - Indian Health Service / Resource and Patient Management System (RPMS)
 - Social Security Administration
 - Centers for Disease Control
 - Department of Homeland Security
 - Department of Health and Human Services and its agencies

2.8. Contractor Roles and Responsibilities

The Contractor is expected to:

- Designate a person to whom all project communications may be addressed and who has the authority to act on all aspects of the contract for services. This person will be responsible for the overall project and will be the contact for all invoice and Contractor staffing issues.
- Provide written reports for review and approval by NC HIE and formally respond to NC HIE review findings as necessary.
- The Project Manager will review and approve Contractor's staffing and time allocations at the onset of the contract. The Contractor will make its best efforts to maintain staff continuity throughout the life of the project. If, however, a substitution becomes necessary, the Contractor must submit a resume for review, in advance, of all proposed personnel substitutions. All Contractor personnel substitutions must be approved in writing by the NC HIE Project Manager. Failure to receive the required approvals may result in termination of the contract.

2.9. NC HIE Roles and Responsibilities

NC HIE will:

- Designate a NC HIE contact person (Project Manager) to whom all Contractor communications may be addressed and who has the authority to act on all aspects of the services. This person will review the agreement and associated documents with the Contractor to ensure understanding of the responsibilities of both parties.
- Provide access to business and technical documents as necessary for the Contractor to complete the tasks identified in this RFP.
- Ensure appropriate resources are available to perform assigned tasks, attend meetings, and answer questions.
- Ensure that decisions are made in a timely manner.
- Provide work areas and meeting rooms as needed.
- Designate a Project Manager and RFP Review Team, for the Procurement Consulting Services engagement
- Identify and provide access to Subject Matter Experts to assist with the elaboration of technical requirements, including NC HIE's Clinical & Technical Operations Workgroup.

2.10. Project Assumptions and Constraints

- The Contractor must disclose any actual or possible conflict of interest with respect to HIE vendors (defined as entities that offer any of the HIE or health IT services identified herein). It is the obligation of the Contractor to inform NC HIE of financial interests with HIE vendors in its application and/or at any point during the application process, negotiations, and throughout the course of a contract with NC HIE.
- The Contractor's work hours must be consistent with NC HIE's key staff. NC HIE's normal business hours are 8:00 AM to 5:00 PM EST, Monday through Friday, except for standard holidays.
- Any modifications to tasks within the SOW of this contract will be defined, documented and mutually agreed upon by the Contractor and NC HIE's Project Manager prior to starting work on the modified task. Amendments to the contract for tasks within the SOW are limited to an extension of time or tasks directly related to procurement management as outlined in this SOW.

- The NC HIE Project Manager reserves the right to renegotiate the services deemed necessary to meet the needs of this project according to NC HIE priorities. NC HIE and the Contractor must mutually agree to all changes. Renegotiated services outside the scope of the original contract will require contract amendment prior to commencement of work.
- NC HIE expects the work to be conducted primarily from the consultant's facilities. There will be periodic needs for onsite work at NC HIE furnished facilities. ***The Contractor must specify which work will be performed on-site or remotely.***
- NC HIE and the Contractor are mutually obligated to keep open and regular channels of communication in order to ensure the successful execution of this contract. Both parties are responsible for communicating any potential problem or issue to NC HIE's Project Manager and the Contractor's engagement manager, respectively, within two business days of becoming aware of the problem.

2.11. Contract Engagement Period

The term of this contract is from award to June 30, 2011, or until deliverables have been met; whichever is later.

2.12. Travel

NC HIE does not expect that travel outside of Wake County will be required to complete the SOW described in this RFP. If, however, NC HIE directs the Contractor to travel outside of Wake County, NC HIE will reimburse the Contractor at the rates in use by the State of North Carolina for its represented employees. Receipts will be required. Any travel deemed necessary for the project must be approved in advance by the Project Manager. NC HIE will only reimburse for approved travel to NC HIE designated locations and facilities.

The cost of any travel to or within Wake County must be included in the hourly rates specified in the Cost Worksheet submitted with the Contractor's Proposal; it will not be separately reimbursed.

2.13. Payment and Invoicing

Payment to Contractor is contingent upon NC HIE receiving funding from the State of North Carolina and the Federal Supplemental Terms and Conditions described in Section 6. NC HIE shall bear no liability or responsibility for payment to Contractor, even for services provided and delivered, in the event payment to NC HIE from the State is delayed, suspended, or terminated.

Payment to the Contractor will be contingent upon final approval of each deliverable.

This is a deliverable-based fixed priced agreement. The hours projected for each identified deliverable will be used to assess the reasonableness of the Contractor's Proposal. The contractor may invoice NC HIE only after the successful completion and acceptance of the deliverable. The Contractor may not invoice NC HIE for any costs exceeding the maximum amount identified to complete a deliverable.

3. CONTRACTOR RESPONSE GUIDELINES AND CONTENT

3.1. Proposal Format

Proposal must be submitted using font with an 11-point pitch. Contractors are expected to adhere to the page limits noted in each section below. Information exceeding the page limits will not be reviewed.

One electronic copy and five bound copies of the proposal must be submitted to the contact noted in Section 1.3 of this RFP by 5:00 PM EST on **February 1, 2011**. Proposals submitted in response to this RFP must include the information noted in Sections 3.2–3.11 below.

3.2. Cover Letter

Include a cover letter with the following information (maximum of one page):

- Contractor's company name, mailing address and telephone number
- Name, telephone number, and email address of a contact person
- Title of this solicitation
- Submission date of the Proposal
- Contractor's total Proposal amount
- Signature of an individual authorized to enter into contracts for the Contractor

3.3. Contractor Qualifications

Describe and provide examples of the company's overall organizational capability and resources as they relate to the general requirements set forth in this RFP's Scope of Work, including the following (maximum of eight pages):

- Ability to manage the project and the risks involved with the project
- Ability to complete projects on time and within budget
- Ability to provide quality deliverables
- Evidence of the firm's experience performing the services outlined in this solicitation, including the total number of years the firm has been providing the services outlined in the SOW

The applicant shall also disclose any actual or possible conflict of interest with respect to HIE vendors (defined as entities that offer any of the HIE or health IT services identified herein) as described in section 2.10. Project Assumptions and Constraints.

3.4. Contractor References

Provide a minimum of two corporate references from previous engagements similar in nature and size to the effort described in this RFP's SOW. References must be external to a Contractor's organization and corporate structure.

Include the following information for each reference (maximum of one page per reference):

- Engagement name and contract number
- Brief description of the engagement
- Contact name and title
- Contact email
- Contact phone

NC HIE staff may contact referenced organizations when reviewing a Contractor's Proposal to verify the information provided.

3.5. Engagement Team Qualifications

Describe the qualifications of each of the members of the proposed engagement team. Identify the role that each member is expected to play and describe the experience, education, knowledge, and skills each member possesses as it relates to their proposed role.

At a minimum, each of the Contractor's team members must have experience in many of the areas listed below; however, experience in all of the areas listed below must be addressed collectively as a team (maximum of two pages per individual):

- Identifying and documenting business needs
- Identifying and documenting business requirements
- Identifying and documenting technical requirements
- Designing, developing, and/or implementing IT solutions
- Managing projects
- Developing Requests for Proposals
- Managing procurement efforts
- Working with organizations and/or programs similar to NC HIE
- Producing quality deliverables that require little or no rework

3.6. Team Member Resumes

Provide a resume of the relevant experience for each Contractor team member proposed. Resumes should clearly demonstrate that the person possesses the experience required to execute the tasks and develop the deliverables specified in the SOW as well as fulfill the role he or she will play on the engagement team.

Include relevant jobs or projects from the last ten years only. Identify the start and end date of each job or project. (Maximum of eight pages per individual)

3.7. Team Member References

Provide a minimum of two references for each Contractor team member proposed for the engagement. References must be relevant to the role proposed for the team member.

Include the following information for each reference (maximum of one page per individual):

- Engagement name and contract number
- Brief description of the engagement
- Contact name and title
- Contact email
- Contact phone

3.8. Project Management Approach

Describe the project management approach the Contractor proposes to take to accomplish the requirements outlined in the SOW on time and within budget, and for meeting customer quality expectations.

Identify the tools the Contractor proposes to use and the project management artifacts it will produce as part of managing the Vendor procurement project (maximum of 15 pages, including charts).

3.9. Understanding and Description of the Tasks to be Performed (Work Plan)

Include a description of your understanding of the Scope of Work. Emphasize your understanding of NC HIE's objectives and the major activities that must be performed to complete the work. Describe the activities you will perform to complete the required work. Include your expectations of all entities outside your own team.

Provide a high-level work plan for this effort. The work plan must identify major activities, estimated start and end dates, and deliverable milestones. At minimum the work plan must map each primary task to a deliverable. The response must include any additional information that the Contractor deems necessary to explain how the Contractor intends to meet NC HIE's requirements. Include the following as appropriate (maximum of 25 pages including charts, tables, and graphs):

- Overview of the required tasks and outcomes
- Description of how the tasks will be performed
- Work plan for each task
- Gantt chart view of the project schedule
- Samples of work from other projects, or outlines of what deliverables are proposed for the required tasks

3.10. Assumptions

Document any assumptions the Contractor is making about the Scope of Work, the responsibilities of the Contractor and NC HIE, and any other issues that are relevant to the Contractor's Proposal and ability to do the work for the proposed cost. (Maximum of five pages)

3.11. Cost Worksheet

The Cost Worksheet has been provided as a Microsoft Excel workbook. Contractors are to complete the Worksheet ***using the template provided on the NC HIE website***. List the tasks and deliverables outlined in your work plan. Identify each resource that will be assigned to a task, including the resource's hourly rate, the estimated number of hours that the resource is expected to expend on the task, and the extended rate for that resource on that task.

Two sample tasks have been completed to illustrate the desired end product. Please delete the sample data and replace it with information related to your work plan.

4. EVALUATION AND SELECTION PROCESS

All Proposals will be reviewed for responsiveness to the requirements of the RFP. Incomplete Proposals will not be considered. Contractors will be notified of the specific dates, times, and locations of any interviews of which the proposed team members must be present at the interview.

Proposals will be evaluated and scored on the following criteria:

- Completeness of the Proposal, including all documents and information identified as required in this RFP, and satisfaction of minimum qualifications. (Pass/Fail)
- Qualification of the Contractor above the minimum requirements stated in the SOW (15 points)
- Qualifications of the proposed team members (including desirable requirements and references) (35 points)
- Project management approach (15 points)
- Work Plan (35 points)
- Cost (50 points)

Proposal evaluation possible points: 150

NC HIE reserves the right to interview as many responsive Contractors as it deems appropriate. Interviews will be scored separately.

5. NC HIE PROCUREMENT GUIDELINES

The Proposer is responsible for all costs associated with submitting the response to this RFP. In the event the RFP is withdrawn, NC HIE shall not assume any responsibility for time, effort or materials consumed by the Proposer prior to contract award.

Any materials submitted will become the property of NC HIE. NC HIE reserves the right to use any concepts or ideas contained in the response.

Between the release of the solicitation and the end of the 72-hour period following the posting of the notice of intended award, respondents to this solicitation or persons acting on their behalf may not contact any employee or officer of NC HIE concerning any aspect of this solicitation, except in writing to the Project Manager as provided in the solicitation documents. Violation of this provision may be grounds for rejecting a response.

No negotiations, decisions, or actions shall be initiated or executed by the respondent as a result of any discussions with any NC HIE employee or officer. Only written communications from the Project Manager may be considered a duly authorized expression on behalf of NC HIE. Additionally, only written communications from respondents may be recognized as duly authorized expressions on behalf of the respondent.

If NC HIE finds it necessary to supplement, modify or interpret any portion of the proposal specifications or documents during the procurement period a written addendum will be posted on the NC HIE website at <http://http://www.ncdhhs.gov/healthIT/>. It is the responsibility of the respondent to be aware of any addenda that might affect the submitted proposal.

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Proposals that do not meet the requirements specified in this RFP will be considered nonresponsive. In the best interest of NC HIE, NC HIE reserves the right to reject any and all Proposals or waive any irregularity or technicality in proposals received. Respondents are cautioned to make no assumptions unless their proposals has been deemed responsive.

NC HIE prefers to the extent practicable and economically feasible, products and services that conserve natural resources and protect the environment and are energy efficient.

Contractors and subcontractors must be properly licensed, certified and/or have valid permits for any of the Property or services provided. NC HIE will request evidence prior to executing any subcontract and maintain such evidence as part of the contract file.

The funds being utilized to procure the requested services are funds awarded to NC HIE as part of its Cooperative Agreement with the State of North Carolina for the ONC State HIE project funded by the American Recovery and Reinvestment Act. As a result, NC HIE will fully cooperate with the federal and state governments' access to procurement documents resulting from this RFP, including:

- a. Permitting the HHS, HHS Office of Inspector General, the U.S. Comptroller General, or any of their authorized representatives ("Federal Auditors") or the North Carolina Department of General Services, the Bureau of State Audits, or their designated representative ("State Auditors") the right to review and to copy any records and supporting documentation pertaining to the Request for Proposals, resulting proposals, the performance of the successful contractor, and any subcontracts made there under.
- b. Requiring that any subcontracts awarded by NC HIE to include these provisions in their subcontracts.

NC HIE reserves the right to cancel this procurement at any time.

If NC HIE concludes the number of proposals is inadequate or insufficient, it may reopen and extend the RFP period.

NC HIE is in the process of finalizing its standard contract and mandatory contracting terms. A copy of the standard contract and mandatory provisions will be made available to the successful bidder.

6. SUPPLEMENTAL FEDERAL TERMS AND CONDITIONS FOR ARRA FUNDED PROJECTS

ARRA FUNDED PROJECT: Funding for this contract has been provided through the American Recovery and Reinvestment Act (ARRA) of 2009, Pub. L. 111-5. All contractors, including both prime and subcontractors, are subject to audit by appropriate federal or State of North Carolina (State) entities. The State has the right to cancel, terminate, or suspend the contract if any contractor or subcontractor fails to comply with the reporting and operational requirements contained herein.

ENFORCEABILITY: Contractor agrees that if Contractor or one of its subcontractors fails to comply with all applicable federal and State requirements governing the use of ARRA funds, the State may withhold or suspend, in whole or in part, funds awarded under the program, or recover misspent funds following an audit. This provision is in addition to all other remedies available to the State under all applicable State and federal laws.

PROHIBITION ON USE OF ARRA FUNDS: Contractor agrees in accordance with ARRA, Section 1604, that none of the funds made available under this contract may be used for any casino or other gambling establishment, aquarium, zoo, golf course, or swimming pools.

REQUIRED USE OF AMERICAN IRON, STEEL AND OTHER MANUFACTURED GOODS: Contractor agrees that in accordance with ARRA, Section 1605, neither Contractor nor its subcontractors will use ARRA funds for a project for the construction, alteration, maintenance, or repair of a public building or public work unless all of the iron, steel and manufactured goods used in the project are produced in the United States or in a manner consistent with United States obligations under international agreements, as further defined in Code of Federal Regulations (CFR) Title II, Part 176. The Contractor understands that this requirement may only be waived by the applicable federal agency in limited situations as set out in ARRA, Section 1605 and applicable federal regulations.

WAGE RATE REQUIREMENTS: In accordance with ARRA, Section 1606, the Contractor assures that it and its subrecipients shall fully comply with said Section and notwithstanding any other provision of law and in a manner consistent with other provisions of ARRA, all laborers and mechanics employed by contractors and subcontractors on projects funded directly by or assisted in whole or in part by and through the federal government pursuant to ARRA shall be paid wages at rates not less than those prevailing on projects of a character similar in the locality as determined by the United States Secretary of Labor in accordance with Subchapter IV of Chapter 31 of Title 40, United States Code (Davis-Bacon Act). It is understood that the Secretary of Labor has the authority and functions set forth in Reorganization Plan Numbered 14 or 1950 (64 Stat. 1267; 5 U.S.C. App.) and Section 3145 of Title 40, United States Code.

INSPECTION OF RECORDS: In accordance with ARRA Sections 902, 1514 and 1515, Contractor agrees that it shall permit the State of North Carolina, the United States Comptroller General or his representative or the appropriate Inspector General appointed under Section 3 or 8G of the United States Inspector General Act of 1978 or his representative to: (1) examine any records that directly pertain to, and involve transactions relating to, this contract; and (2) interview any officer or employee of Contractor or any of its subcontractors regarding the activities funded with funds appropriated or otherwise made available by the ARRA. Contractor shall include this provision in all of the contractor's agreements with its subcontractors from

whom the contractor acquires goods or services in its execution of the ARRA funded work.

WHISTLEBLOWER PROTECTION: Contractor agrees that both it and its subcontractors shall comply with Section 1553 of the ARRA, which prohibits all non-federal Contractors, including the State, and all contractors of the State, from discharging, demoting or otherwise discriminating against an employee for disclosures by the employee that the employee reasonably believes are evidence of: (1) gross mismanagement of a contract relating to ARRA funds; (2) a gross waste of ARRA funds; (3) a substantial and specific danger to public health or safety related to the implementation or use of ARRA funds; (4) an abuse of authority related to implementation or use of ARRA funds; or (5) a violation of law, rule, or regulation related to an agency contract (including the competition for or negotiation of a contract) awarded or issued relating to ARRA funds. Contractor agrees that it and its subcontractors shall post notice of the rights and remedies available to employees under Section 1553 of Title XV of Division A of the ARRA.

FALSE CLAIMS ACT: Contractor agrees that it shall promptly notify the State and shall refer to an appropriate federal inspector general any credible evidence that a principal, employee, agent, subcontractor or other person has committed a false claim under the False Claims Act or has committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct involving ARRA funds.

REPORTING REQUIREMENTS: Pursuant to Section 1512 of the ARRA, in order for state agencies receiving ARRA funds to prepare the required reports, Contractor agrees to provide NC HIE with the following information on a quarterly basis or upon request:

- a. The total amount of ARRA funds received by Contractor during the Reporting Period;
- b. The amount of ARRA funds that were expended or obligated during the Reporting Period;
- c. A detailed list of all projects or activities for which ARRA funds were expending or obligated, including:
 - i. The name of the project or activity;
 - ii. A description of the project or activity;
 - iii. An evaluation of the completion status of the project or activity; and
 - iv. An estimate of the number of jobs created and /or retained by the project or activity;
- d. For any contracts equal to or greater than \$25,000:
 - i. The name of the entity receiving the contract;
 - ii. The amount of the contract;
 - iii. The transaction type;
 - iv. The North American Industry Classification System (NAICS) code or Catalog of Federal Domestic Assistance (CFDA) number;
 - v. The Program source;
 - vi. An award title descriptive of the purpose of each funding action;
 - vii. The location of the entity receiving the contract;
 - viii. The primary location of the contract, including the city, state, congressional district and country;
 - ix. The DUNS number, or name and zip code for the entity headquarters;
 - x. A unique identifier of the entity receiving the contract and the parent entity of Contractor, should the entity be owned by another; and
 - xi. The names and total compensation of the five most highly compensated officers of the company if it received: 1) 80% or more of its annual gross

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- revenues in Federal awards; 2) \$25M or more in annual gross revenue from Federal awards and; 3) if the public does not have access to information about the compensation of senior executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 or section 6104 of Internal Revenue Code of 1986.;
- e. For any contracts of less than \$25,000 or to individuals, the information required above may be reported in the aggregate and requires the certification of an authorized officer of Contractor that the information contained in the report is accurate.

Any other information reasonably requested by the State of North Carolina or required by state or federal law or regulation.